Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (703) 746-4000

appropriate. All further of	correspondence including the d below or directed otherwise	Patent, advance orders and n	d PUBLICATION FEE (if rec otification of maintenance fees g a new correspondence addres	will be mailed to the current	t correspondence address as	
	NCE ADDRESS (Note: Legibly mark-up	n with any corrections or use Block 1)	None A 115 A	.6 .77		
23932	7590 11/28/2003	OIPE	papers. Each additio	of mailing can only be used in This certificate cannot be used nal paper, such as an assignment ate of mailing or transmission.	ent or formal drawing, must	
1 .				-	•	
JENKENS & GILCHRIST, PC Certificate of Mailing or Transmission						
1445 ROSS-AVENUE			I hereby certify that	this Fee(s) Transmittal is being	ng deposited with the United	
SUITE 3200 <b>FEB 2 5</b>			addressed to the M	with sufficient postage for fi ail Stop ISSUE FEE address	rst class mail in an envelope s above or being facsimile	
DALLAS, TX 75	3202		transmitted to the US	SPTO, on the date indicated be	low.	
· DALLAS, IX /3	,20 <b>2</b>	T. S	Caclo El	rice	(Depositor's name)	
				MID	(Depositor o nume)	
•	-	MACEMATIN	$10^{\circ}$ $\Omega$	$\sim$	(Signature)	
		ALLEN	Edoc Los	· OF GOOD	(Date)	
		•	LEDIUM	4 80, 8004	(Date)	
APPLICATION NO.	FILING DATE	FIRST NAM	MED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/024,829	12/18/2001	Kje	ll Ekberg	45687-00083USPT	5692	
TITLE OF INVENTION: OZONE GENERATOR						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
		1	<u> </u>		L	
nonprovisional	YES	\$665	\$300	\$965	03/01/2004	
EXA	AMINER	ART UNIT	CLASS-SUBCLASS			
VERSTEEG, STEVEN H		1753	422-186180	_		
1. Change of correspondence address or indication of "Fee Address" (37						
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or 2						
☐ "Fee Address" indic PTO/SB/47; Rev 03-02 Number is required.	ation (or "Fee Address" Indica 2 or more recent) attached. Us	agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
2 ASSIGNEE NAME AN	ND PESIDENCE DATA TO E	RE PRINTED ON THE PATE	NT (print or type)			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has						
been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
OTRE AB S-17177 Stockholm, Sweden						
				corporation or other private g	roup entity  government	
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):						
Issue Fee And A check in the amount of the fee(s) is enclosed.						
A Publication Fee						
Advance Order - # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).						
Director for Patents is req	uested to apply the Issue Fee a		to re-apply any previously paid			
(4.4. : 16: )	<del>.</del> .	(D.11)	<del></del>		<del> </del>	
(Authorized Signature)	V. WIMA	FUR 24 200	1			
NOTE; The Issue Fee other than the applican	and Publication Fee (if require t; a registered attorney or ag records of the United States P	red) will not be accepted from	r party in [	in		
					665.00 OP 300.00 OP	
suggestions for reducin Patent and Trademark 22313-1450. DO NOT	mation is required by 37 CFR it by the public which is to fairly is governed by 35 U.S.C. nutes to complete, including gorm to the USPTO. Time with amount of time you go this burden, should be sent office, U.S. Department SEND FEES OR COMPLETED IN THE PUBLIC COMPLETED I	to the Chief Information Off of Commerce, Alexandria, ETED FORMS TO THIS A	rocess) an illection is nitting the individual im and/or ficer, U.S.  Virginia DDRESS.			
SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.						

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.